

PHS

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1964

Health Mobilization Series

F-10

REFERENCE SERVICES
DIVISION OF CHRONIC
DISEASES, M. H. S.

JUL 3 1964

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Civil Defense Emergency Hospital CUSTODIAN'S HANDBOOK

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CIRCULATE

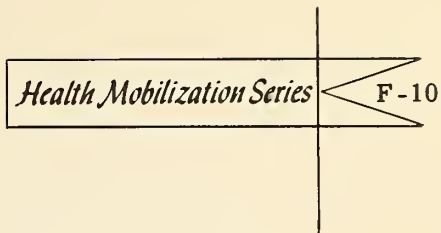


U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service

FREQUENTLY USED INFORMATION

	Name	Address	Telephone
PHS-DHM State Representative	_____	_____ _____ _____	_____
State Health Officer	_____	_____ _____ _____	_____
State Civil Defense Director	_____	_____	_____
Servicing Depot	_____	_____ _____ _____	_____
	_____	_____ _____ _____	_____

These names and addresses can be obtained from the agency in your State which is responsible for the prepositioning of Civil Defense Emergency Hospitals.



Health Mobilization Series F-10

Civil Defense Emergency Hospital CUSTODIAN'S HANDBOOK

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service
Division of Health Mobilization
1964

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YOUR APPOINTMENT AS A CDEH CUSTODIAN

You have been named as a Custodian of a Civil Defense Emergency Hospital (CDEH) by the agency in your State which is responsible for the prepositioning of these packaged hospitals. This is a significant responsibility because the hospital's usefulness in an emergency depends on its being properly stored under continuing care. In assuming this responsibility, you should feel great personal satisfaction because your service to your community will help assure your fellow citizens of medical care in a disaster.

A Custodian's Authority

A Custodian, in Federal procedures of property accountability, holds a very important position. He is responsible to the State Property Officer who, in turn, is responsible directly to the Public Health Service Accountable Officer. The custodian is responsible for seeing that the hospital is properly stored, for keeping it under surveillance to prevent damage, and for reporting any damage which might occur. Upon request from the proper authority, the Custodian releases the CDEH for use.

What Is a CDEH?

While the CDEH, as it will be delivered to you, will appear to be nothing more than a stack of several hundred packing boxes, it can be transformed, when needed, into a complete hospital designed to provide austere but adequate medical care to 200 bed-patients at one time in a disaster situation. The Model 62 CDEH contains supplies for a 30-day operating capability and is worth about \$45,000. Earlier models, which now contain a 3 to 4-day supply of consumable materials, are being brought up to a 30-day capability.

Your Questions Answered

This handbook is intended to answer your questions about the CDEH and how it should be protected. Related information is contained in the following publications which accompany this handbook.

(1) Inspection and Maintenance, Prepositioned CDEH's

(2) A catalogue of that model CDEH which will be in your custody and a list of Supply Additions, if any are planned for your model.

All these publications are punched so that they can be filed in the provided cover for ready reference. Any material which is issued at a later date will also be punched to fit this cover and should be filed in it.

ADVANCE NOTICE OF CDEH SHIPMENT

Before the CDEH is delivered to your custody, the Depot manager or his assistant will get in touch with you to establish a mutually acceptable delivery date. After preliminary arrangements, the CDM Depot will send you:

- (1) A U.S. Government Bill of Lading covering the shipment with instructions for filling it out and the address to which it should be sent.
- (2) Form PHS-3704-1 (Shipping Authorization/Receiving Report) with instructions.
- (3) A packing case checklist which you will use during the unloading to verify the completeness of the shipment.

Major CDEH Components

The Model-62 CDEH contains approximately 700 items of supply and equipment, which provide for the following:

- (1) Operating rooms
- (2) A clinical laboratory
- (3) X-ray and fluoroscopic services
- (4) Central supply and sterilization services
- (5) A pharmacy
- (6) Patient admission facilities
- (7) Hospital wards
- (8) Limited maintenance and housekeeping supplies and equipment
- (9) Emergency electric power
- (10) Water treatment, storage, and pumping facilities.

Two copies of manufacturers' manuals, covering in detail the installation, operation, maintenance, and repair parts, are furnished with the following equipment:

- (1) Anesthesia apparatus
- (2) Wangenstein phelan drainage apparatus
- (3) Generator, $2\frac{1}{2}$ KW
- (4) Generator, 15 KW, gasoline (or two 10 KW generators)

- (5) Lantern, gasoline
- (6) Radiographic control unit
- (7) Sterilizer, pressure cooker
- (8) Sterilizer, surgical instrument
- (9) Surgical stand light, enclosed dome type

The Division of Health Mobilization is publishing a series of booklets on the operation of the CDEH. A list of the titles appears in Appendix C.

How Hospital Supplies and Equipment Are Selected

All supplies and equipment packed in the CDEH must meet the following criteria:

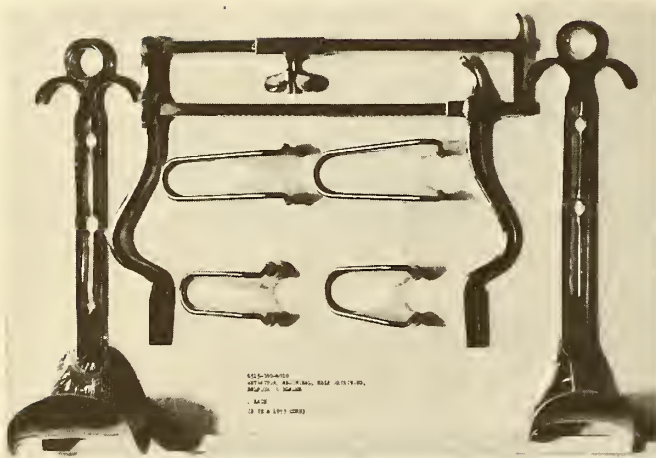
- (1) They must be sufficient to provide austere but adequate medical care in terms of the program's objectives and the finances available.
- (2) They must be suitable for long-term storage and permit practical quality control measures.
- (3) They must permit effective use within the limitations of the medical manpower expected to be available.
- (4) Consumable items must be provided in quantities and in a functional balance to afford emergency medical care for an estimated 30-day period without significant resupply needs. Reusable rather than disposable items have been selected where practical to limit storage requirements and assure continued availability.
- (5) Items of nonexpendable hospital hardware shall meet adequate quality standards to assure long-range hospital operation.
- (6) In case of public utility failure, equipment must be adaptable to auxiliary power provided by the CDEH generator.

Food service, laundry, and other such services for the hospital are to be provided from other sources in the civil defense plan.

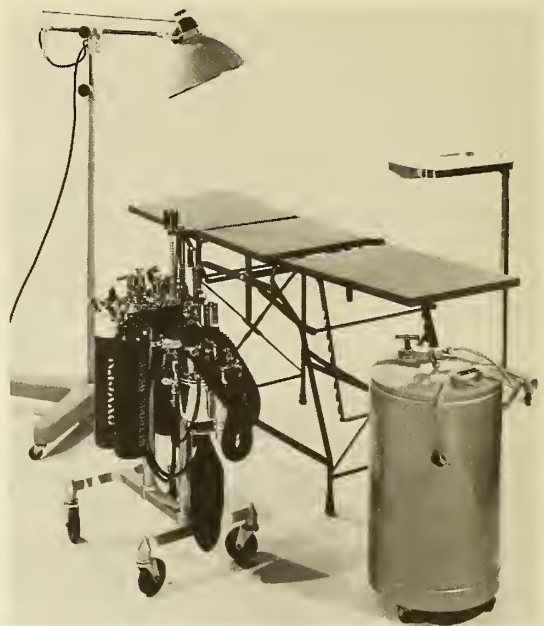
ASSURING THE USABILITY OF THE HOSPITAL

In assembling and packaging the hospital and in providing minimum storage criteria, the Federal Government has done its utmost to assure the proper protection and preservation of the equipment and supplies in long-term storage. At the State and local level, careful plans for the utilization of the hospital have been made and those who will operate it in an emergency situation are receiving training in the duties they will assume at that time.

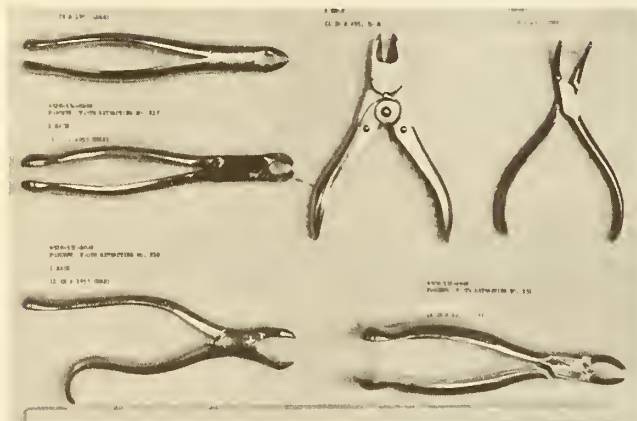
SOME OF THE MAJOR ITEMS OF HOSPITAL EQUIPMENT SUPPLIED IN THE MODEL 62 CDEH



Surgical instruments

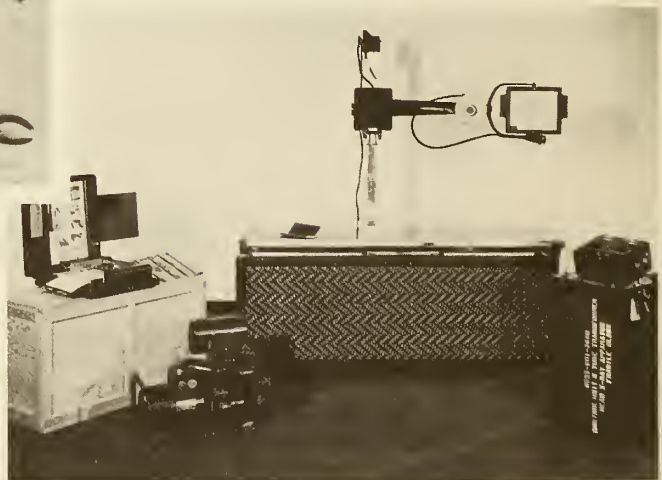


Operating room equipment



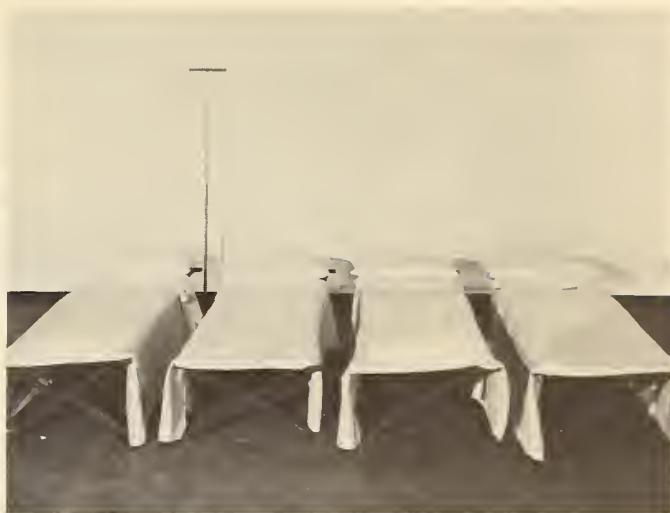
Dental instruments

X-ray equipment including
a 2½ KW generator





Generator, 15 KW



Cots (200 in CDEH)



Sterilizer



Water storage tank (1,500 gal.)



Laboratory microscope and suction and pressure apparatus

All this is not enough, however, to guarantee that your community will have a usable hospital should a need arise. The future usability of the CDEH depends largely upon the continuing care and protection which you, as custodian, provide.

Hazards of Long-Term Storage

Undetected, any of the following hazards can cause extensive damage to the stored supplies and equipment.

- (1) Fire
- (2) Water leakage, condensation or flooding
- (3) Insects and rodents
- (4) Inadequate heating or improperly controlled refrigeration

What You Can Do

The first thing is to see that the hospital is stored properly, in accordance with the storage criteria given in the sample Storage Agreement, Appendix B. Then establish a regular time to inspect the CDEH every month. It is not necessary to spend so much time inspecting that it becomes a drudgery. A quick look for certain warning signs should be sufficient. While you are inspecting, watch for evidence of possible pilferage.

It should never be necessary for you to open any of the hospital containers except when so authorized in emergencies. The material has been packed and sealed in a manner which will forestall damage and breaking seals will hasten deterioration. Indications of conditions which need attention will usually appear outside the box.

What To Look For

Fire Hazards - Exposed electrical wiring and defective electrical switches are a danger. Also, look for any signs that rodents may be gnawing insulation off wires. Be sure that trash and debris are not accumulating and that flammable materials such as solvents, gasoline, fuel oil, etc., are not stored near the CDEH. Be sure that the heating apparatus and any other equipment which runs continually is in good working order.

Water - Look for dripping pipes, condensation, escaping steam, damp or wet floors. Water damage to the hospital is usually indicated by stained or mildewed containers and rust.

Too high humidity will also cause damage. Periodically, open the inspection doors on the outer packing of the generators and observe the color on the humidity indicator card. The card is placed inside the vapor barrier behind a plastic window. The two types of indicator cards in use are:

- (1) The three-spot humidity indicator card. If all spots are blue, the generator is in a safe storage condition with the humidity

inside the vapor barrier at about 25%. If only the bottom spot is pink, the relative humidity is about 30%, and the generator is in a safe storage condition. If the bottom and middle spots are pink, an increasing humidity condition (about 40%) exists. This requires closer surveillance and more frequent inspection. When all three spots are pink, the generator is considered to be in an unsafe storage condition, and this fact should be reported immediately to your servicing Depot. A list of the CDM Depots, with their addresses and telephone numbers is given in Appendix A.

- (2) The bar humidity indicator card is made of an 8-inch column of silica gel placed in a horizontal position and overprinted with a color chart to indicate relative humidity within the package. When the card indicates the humidity within the package is in the 40-60% range, the generator is considered to be in an unsafe storage condition, and this fact should be reported immediately to your servicing Depot (See Appendix A).

Temperature - In colder climates, take winter temperature readings in the storage area which requires heat. In no case should the temperature be permitted to drop below 32° F.

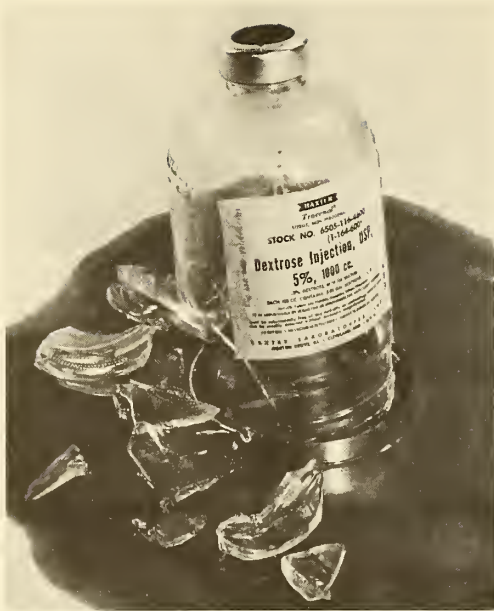
Refrigeration - A range of 35° to 50° F. is acceptable and should be maintained in all refrigerated storage.

Termites and Post Beetles - The presence of termites is usually indicated by cuttings which look like fine sawdust. Look for termite tunnels and termite damage to containers. If you find any cause for suspicion, move boxes so that all sides can be checked. Breaking the termite tunnel by moving the box or scraping away the tunnel will stop termite activity temporarily. Post beetles leave a white, powdery substance. In regions where this pest is prevalent, check the wooden boxes and wooden items such as cot frames.

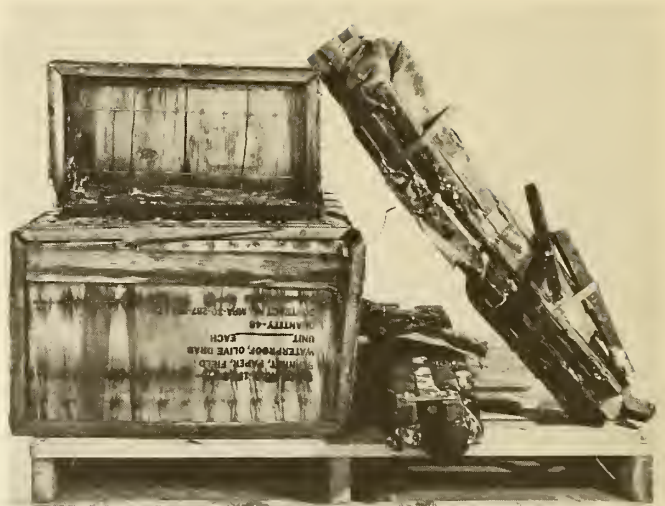
Rodents - Check for chewed holes in packing cases and evidence of nesting and droppings of rats and mice.

Thefts and Vandalism - CDEH supplies and equipment are the property of the Federal Government and thefts or vandalism should be reported immediately by telephone to the nearest office of the Federal Bureau of Investigation, to the local police, and to your State agency. Confirm the call to your State agency with a written report. The details of this report will be transmitted by the State agency to the Regional Program Director through the PHS Regional Health Director, Department of Health, Education, and Welfare.

Destruction by Fire - Loss by fire should be reported in the same manner as thefts, except that where there is no suspicion of arson, the Federal Bureau of Investigation need not be advised.



Freezing caused this damage



Water caused the damage to these hospital components



Periodic inspection of stored CDEH's can prevent unnecessary damage



This damage is the result of termites



Rats can cause extensive damage

PHOTO BY AMERICAN CYANAMID CO.

WHAT TO DO ABOUT CONDITIONS REQUIRING CORRECTION

If you discover a condition which could lead to damage of the hospital, you should do all that is possible to correct the trouble. If you cannot correct it through the use of your own facilities or those of your community, the condition should be reported immediately by telephone to the CDM Depot responsible for servicing the CDEH. Send a written report to the State agency responsible for assigning the hospital to your custody and a copy to the PHS Regional Health Director. (See Appendix A for address.)

FEDERAL INSPECTIONS

The Federal Government will inspect the CDEH periodically in order to (a) assure its proper storage and maintenance, (b) up-date supply items, (c) test and rehabilitate equipment as necessary, and (d) make a physical inventory of the components of the hospital. This is an established program of inspection and maintenance necessary to comply with regulations governing accounting for Federal property. Also, it will assure your community that the hospital is in good condition.

Advance arrangements for the inspection will be made with you by an employee of the servicing depot. Your presence and assistance during these inspections will be appreciated.

Federal Responsibility in Maintaining the Hospital

The Federal Government, acting through the CDM Depot inspection teams, will be responsible for:

- (1) Replacing the components which have passed expiration dates or are determined to be nonusable because of normal deterioration.
- (2) Replacing packaging materials that are damaged or deteriorated in normal storage.
- (3) Maintaining and repacking mechanical equipment such as generators, pumps and surgical apparatus.
- (4) Replacing damaged or destroyed components, including an entire CDEH if necessary, when it is determined that damage was not caused by negligence of the State, or when damage results from Acts of God (storms, floods, or fires).
- (5) Replacing missing or damaged components regardless of cause when the total cost does not exceed \$100 per hospital and there is no frequent repetition of such requirement.

State or Community Responsibility in Maintaining the Hospital

States will be responsible for:

- (1) Costs incident to maintaining the CDEH in acceptable storage conditions (refrigeration, heating, etc.).

- (2) Costs for replacing missing or damaged components when the total costs exceed \$100 per hospital, if it is determined that such loss was a result of negligence of the State or its agents. Replacements will be made through the CDM Depots.
- (3) Costs for relocation of a CDEH from an unacceptable to an acceptable location.
- (4) Correcting other unsatisfactory storage conditions.

PROPERTY ACCOUNTABILITY

The hospital is Federal property. Only when our country is attacked and a national emergency is proclaimed does the State assume control over the disposition of the hospital. As Federal property, it must be accounted for in the manner prescribed by Federal regulations.

Property accountability begins with the receipt of bulk stocks in the CDM Depots. The Depots are responsible to the Public Health Service Accountable Officer for the property as bulk stocks until the property is assembled into CDEH's or CDEH components. The property is then accounted for as assembled units.

When you receive your hospital, the Depot is relieved of further property responsibility and a new line of accountability is established. The new line begins with you as Custodian and proceeds through the State Property Officer, who assumes responsibility on behalf of the State, to the same Public Health Service Accountable Officer. These property transactions are all taken care of through the use of form PHS 3704-1 (Shipping Authorization/Receiving Report) mentioned on page 2. You can understand the need for prompt action in completing form 3704-1 in accordance with instructions which will be furnished to you when you receive the hospital or when you receive replacements or additions.

Release of the Hospital for Use in a Local Disaster

A CDEH may be released for use in a local disaster only when specifically authorized by your Public Health Service Regional Health Director for the Department of Health, Education, and Welfare. This authorization will come through the agency in your State which is responsible for the assignment of the CDEH to your community.

Release of the Hospital in a National Emergency

Upon declaration of a national emergency, this State agency has authority to direct the activation of the hospital at the site previously selected for its installation.

Return of CDEH Components to Depot

If a CDM Depot inspection team finds hospital components in unsatisfactory condition, it will make corrections on the spot if possible. Otherwise, these items will be taken to the Depot and returned to you after they are rehabilitated or up-dated. You will receive property receipts for any materials

which are removed and it is wise to keep these receipts and other property transfer documents in a special file.

To prevent irreparable damage, the CDM inspection team is authorized to return the CDEH to the Depot immediately. If its return to the Depot is found desirable for any other reason, such action will be taken only after a mutual understanding between the Public Health Service Regional Health Director and your State agency is reached.

Site or Storage Facility Changes

Questions pertaining to CDEH site selection, site or storage facility improvements, or a required change of site or storage facility which arises out of Federal CDEH inspections will be negotiated between the Public Health Service Regional Health Director and the officials of the State concerned.

Certificate of Award

Each DHM Regional Representative, with the approval of his Regional Health Director, selects Custodians in his area who have given outstanding service in caring for prepositioned CDEH's. The Department of Health, Education, and Welfare, through the Public Health Service, awards a certificate, shown below, to these men in recognition of their excellent work. Concurrences in the selection of Custodians to receive this honor are usually obtained from the State Health and/or civil defense officials and the Stockpile Management Branch, which is responsible for the CDEH inspection program. PHS State Program Representatives and the Stockpile Management Branch may also recommend Custodians for awards.

*U.S. Department of
Health, Education, and Welfare*

Public Health Service

awards this certificate to

*for providing excellent storage facilities, protection
and maintenance for a Civil Defense Emergency Hospital
which is prepositioned for use in a national emergency*

in _____

Date of Award

Change of Custodians

Should you find it necessary to be relieved of your designation and responsibilities, you must:

- (1) Notify your State agency and request that a successor be designated.
- (2) Turn over all your records and reference materials, including this handbook, to your successor.
- (3) Give all keys to the storage area to your successor.

If you wish a written release from your responsibilities, you should request it from the State Property Officer.

Unanswered Questions

Any question regarding the storage or maintenance of the CDEH which is not answered in this handbook should be directed to your State agency.

APPENDIX A

Addresses

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE REGIONAL OFFICES

<u>DHEW REGION</u>	<u>Address</u>	<u>Telephone</u>	<u>Area</u>
I	120 Boylston Street Boston, Massachusetts 02116	Hubbard 2-6550	Connecticut Maine Massachusetts New Hampshire Rhode Island Vermont
II	Room 1200 42 Broadway New York, New York 10004	363-4040	Delaware New Jersey New York Pennsylvania
III	700 East Jefferson St. Charlottesville, Va. 22901	296-5171	District of Columbia Kentucky Maryland North Carolina Virginia West Virginia Puerto Rico Virgin Islands
IV	Room 404 50 Seventh St., N.E. Atlanta, Georgia 30323	Trinity 6-3311	Alabama Florida Georgia Mississippi South Carolina Tennessee
V	Room 712 New Post Office Bldg. 433 West Van Buren St. Chicago, Illinois 60607	828-4400	Illinois Indiana Michigan Ohio Wisconsin
VI	560 Westport Road Kansas City, Missouri 64111	Baltimore 1-7000	Iowa Kansas Minnesota Missouri Nebraska North Dakota South Dakota

<u>DHEW REGION</u>	<u>Address</u>	<u>Telephone</u>	<u>Area</u>
VII	1114 Commerce Street Dallas, Texas 75202	749-5611	Arkansas Louisiana New Mexico Oklahoma Texas
VIII	Room 551 621 Seventeenth St. Denver, Colorado 80202	Keystone 4-4151	Colorado Idaho Montana Utah Wyoming
IX	447 Federal Office Bldg. Civic Center San Francisco, Calif. 94102	Klondike 2-2350	Alaska Arizona California Hawaii Nevada Oregon Washington Guam American Samoa

CIVIL DEFENSE MEDICAL DEPOTS

<u>Address</u>	<u>Telephone Number</u>
P. O. Box 6 Mira Loma, California	Overland 5-5211 Ext. 407 - Area Code 714
Naval Supply Depot Rough and Ready Island Stockton, California	Howard 6-6031 Ext. 437 - Area Code 209
P.O. Box A Carterville, Illinois	WYandotte 2-2231 (Ordill) - Area Code 618
Seneca, Illinois	ELliott 7-6195 Area Code 815
Building No. 72 1400 Dutch Lane Jeffersonville, Indiana	283-3511 Ext. 3214 - Area Code 812
1121 Fourth Street, S.E. Hampton, Iowa	GLendale 6-2509 Area Code 515
95 South Main Street Gilbertville, Massachusetts	477-6951 Area Code 413
P. O. Box 156 Prairie, Mississippi	369-8132 Area Code 601
P. O. Box 147 Neosho, Missouri	GLendale 1-2336 Area Code 417
*Commanding Officer Sioux Army Depot Sidney, Nebraska	254-4513 Area Code 308
*Assistant Director Supply Service Veterans Administration Supply Depot Somerville, New Jersey	RAndolph 5-2540 Area Code 201
Horseheads Industrial Center Elmira, New York	REgent 9-5684 Area Code 607
Route No. 1 Romulus, New York	585-6694 Area Code 315
P. O. Box 272 Shelby, Ohio	SHelby 4-1901 Area Code 216

AddressTelephone Number

National Storage Co., Inc.
P. O. Box 68
Boyers, Pennsylvania

Slippery Rock 8474

Wampum, Pennsylvania

KE 5-4356 - Area Code 412

440 South Front Avenue
Rockwood, Tennessee

354-0461
Area Code 615

P. O. Box G
Bastrop, Texas

CA 9-2882
Area Code 512

c/o Naval Supply Depot
Clearfield, Utah

825-2287
Area Code 801

Naval Supply Center
Williamsburg, Virginia

CApital 9-2811
Ext. 251 and 252
Area Code 703

3322 N. Sullivan Road
Spokane, Washington

WAlnut 4-5362
Area Code 509

*These depots do not have a responsibility for CDEH inspections.

All depots without the asterisk (*) should be addressed:

Manager
Civil Defense Medical Supply Depot
(address given above)

APPENDIX B

PHS-3998
3-62

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

SEE INSTRUCTIONS
ON REVERSE

STORAGE AGREEMENT FOR A CIVIL DEFENSE EMERGENCY HOSPITAL—PART I

This Agreement is entered into between the UNITED STATES PUBLIC HEALTH SERVICE, DEPARTMENT OF HEALTH EDUCATION, AND WELFARE acting by and through the parties signatory hereto for the Federal Government, and the

STATE OF

acting by and through the parties signatory hereto for the State and shall be in effect on the date of property loan approval stated herein by the Property Accountable Officer, Public Health Service.

Pursuant to the Federal Civil Defense Act of 1950 (Public Law 920, 81st Cong.), Executive Order 10958 of August 14, 1961 and Executive Order 11001 of February 16, 1962, the U.S. Public Health Service has authority to distribute civil defense emergency hospitals and the States are authorized to accept custody, store, and preserve these hospitals in a state of readiness for use in event of a civil defense emergency.

A civil defense emergency hospital, referred to hereinafter as a hospital, as used in this Agreement shall include assembled units or line item components as shown below.

In accordance with these authorities and the provisions in the civil defense emergency hospital prepositioning program, the parties signatory to Part I hereof, in consideration of the mutual promises expressed herein, agree to and with each other on the Terms and Conditions of Part II and on the stipulations of Appendixes A, B, and C which are annexed hereto, all of which terms conditions, and appendixes are hereby made a part of this Agreement.

(Continued on back of this sheet)

STATE OF

APPROVED BY STATE HEALTH DIRECTOR

APPROVED BY STATE CIVIL DEFENSE DIRECTOR

Signature _____

Signature _____

TITLE _____

DATE _____

TITLE _____

DATE _____

UNITED STATES OF AMERICA

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

APPROVED: _____, 19____

APPROVED: _____, 19____

BY: _____
REGIONAL HEALTH DIRECTOR

BY: _____
CHIEF, DIVISION OF HEALTH MOBILIZATION

PROPERTY LOAN APPROVED:

DATE _____, 19____

BY: _____
PROPERTY ACCOUNTABLE OFFICER, PHS

CDEH STORAGE LOCATION AND CUSTODIAN

HOSPITAL IDENTIFICATION (Serial No. and Model)

STORAGE SITE (Mailing Address)

Identify assembled units or component case numbers stored at each separate location. If entire hospital is to be stored in one building location, enter in one box "Complete Hospital."

UNIT OR CASE NUMBERS	UNIT OR CASE NUMBERS
BUILDING	BUILDING
ADDRESS	ADDRESS
UNIT OR CASE NUMBERS	UNIT OR CASE NUMBERS
BUILDING	BUILDING
ADDRESS	ADDRESS

PLANNED POINT OF OPERATION (Building and Address)

CUSTODIAN (Name and address)

ALTERNATE IN POSSESSION OF KEYS (Name and address)

TELEPHONE NO.

BUSINESS:

HOME:

TELEPHONE NO.

BUSINESS:

HOME:

(Supersedes Form OCDM-440)

ADDITIONAL CONDITIONS—PART I (Continued)

The purpose of this Agreement is to provide for the storage, at a strategic location, of a civil defense emergency hospital and to provide for the use of such hospital in the event of a civil defense emergency in accordance with plans developed by the State and accepted by the Federal Government as provided for in Part II of this Agreement.

For purpose of this Agreement, the State Health Director, as used herein, shall be the Director of the State Health Department or any other State official designated by the State as having primary responsibility for the civil defense health mobilization program.

SAMPLE

INSTRUCTIONS

1. The applicant State shall prepare Part I to effect the following: (a) Application for a CDEH; or (b) Relocation of an existing prepositioned CDEH; or (c) Request a Supply Addition to a prepositioned CDEH. The State shall sign, enter title and date of signature on six (6) copies and forward them to the PHS Regional Health Director. Signatures of the head of the State civil defense organization and the State Health Director both are desired. The Federal Government will accept applications only when signed by the State Health Director or, in lieu thereof, another State official designated by the State as having responsibility for the civil defense health mobilization program.
2. The PHS Regional Health Director, if he approves, will date, sign, and forward the six copies of Part I to the Division of Health Mobilization, PHS.
3. The Chief of the Division of Health Mobilization, PHS, or his designee, if he approves, will sign and date acceptance on the six (6) copies. DHM will return five executed copies to the PHS Regional Health Director. The DHM will annex Part II and Appendixes A, B, and C to four (4) of the five copies returned. The four (4) completed sets will be furnished by the RHD to the State Health Director for his distribution to State and local civil defense authorities, the State property officer, and the custodian named therein.
4. State requests for an additional supply of blank agreement forms should be submitted to the PHS Regional Health Director of the appropriate DHEW Regional Office.
5. Part I shall be executed and filed covering each prepositioned hospital. Part II and Appendixes A, B, and C need not be duplicated in files pertaining to two or more hospitals.
6. Any of the printed parts of this storage agreement may be reproduced by any organization at its expense, provided no alterations are made therein.



PREPOSITIONED CIVIL DEFENSE EMERGENCY HOSPITALS

U.S. DEPARTMENT
OF HEALTH, EDUCATION,
AND WELFARE
Public Health Service
Division of Health Mobilization

STOCKPILE MANAGEMENT BRANCH

INSTRUCTIONS FOR PROCESSING FORM PHS-3998

1. The applicant State shall prepare Part I to effect the following: (a) Application for a CDEH; or (b) Relocation of an existing prepositioned CDEH; or (c) Request a Supply Addition to a prepositioned CDEH. The State shall sign, enter title and date of signature on six (6) copies and forward them to the PHS Regional Health Director. Signatures of the head of the State civil defense organization and the State Health Director both are desired. The Federal Government will accept applications only when signed by the State Health Director or, in lieu thereof, another State official designated by the State as having responsibility for the civil defense health mobilization program.
2. The PHS Regional Health Director, if he approves, will date, sign and forward the 6 copies of Part I to the Division of Health Mobilization, PHS.
3. The Chief of the Division of Health Mobilization, PHS, or his designee, if he approves, will sign and date acceptance on the six (6) copies. DHM will return five executed copies to the PHS Regional Health Director. The DHM will annex Part II and appendixes A, B, and C to four (4) of the five copies returned. The four (4) completed sets will be furnished by the RHD to the State Health Director for his distribution to State and local civil defense authorities, the State property officer, and the custodian named therein.
4. State requests for an additional supply of blank agreement forms should be submitted to the PHS Regional Health Director of the appropriate DHEW Regional Office.
5. Part I shall be executed and filed covering each prepositioned hospital. Part II and Appendixes A, B, and C need not be duplicated in files pertaining to two or more hospitals.
6. Any of the printed parts of this storage agreement may be reproduced by any organization at its expense, provided no alterations are made therein.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

CDEH STORAGE AGREEMENT (TERMS AND CONDITIONS—PART II)

ARTICLE I. Storage

One civil defense emergency hospital shall be stored at the location furnished by the State and shown in Part I of this Agreement, which location meets, and shall be maintained by the State so that it continues to meet, the criteria for site selection established by the Federal Government, as shown in the Appendix C. If civil defense plans do not call for emergency operation of the hospital in the building in which it is stored, the building in which its use is planned shall be designated in Part I.

ARTICLE II. Property and Maintenance Responsibilities of the State

The State shall provide adequate accountable record, custodial care, exterior package inspection, preservation, state of readiness, and protective services for such hospital. The State Health Director shall make arrangements for the acceptances and signature acknowledgement of property accountability by the State Property Officer and the acceptance and signature acknowledgement by the custodian of his responsibilities for the hospital, in accordance with such property management procedures as are prescribed by the Federal Government. The State Health Director also shall arrange with appropriate State and local officials for the designation of a property custodian whose responsibilities shall be as stated in Appendix A. The name and address of the custodian, or his successors, shall be furnished by the State Health Director to the Public Health Service, through the PHS Regional Health Director, in the manner provided in Part I, except as otherwise provided in Article XI.

ARTICLE III. Program Direction by State Health Director

The State Health Director shall be responsible to the Federal Government in any matters pertaining to the planned use in a civil defense emergency of the hospital prepositioned under the terms of this Agreement, and for the provision and direction of adequate storage, care, and protective services for such hospital as are required under this Agreement or its appendixes to be performed by the State, and for such reporting as may be required by the Federal Government on these conditions and activities.

ARTICLE IV. Delivery

The Federal Government will be responsible for the original delivery to the approved storage site of the hospital as provided herein, the additional materials thereto, and for the delivery or return of component parts exchanged therein for quality control. Delivery of the hospital or its components shall be acknowledged and accepted at the storage site by the custodian named in Part I, who shall execute and handle the necessary receiving reports, bills of lading, and other documents evidencing acceptance of the shipment on behalf of the State, in accordance with instructions herein or as otherwise prescribed by the Federal Government.

ARTICLE V. Costs

The Federal Government will bear all costs with respect to the acquisition, delivery, and placement into storage of the hospital and its additions, or with respect to delivery or return of exchanges described in Article IV, except as otherwise provided in Appendix B, and except those costs which result from the negligence or non-performance of the State or its agents. All subsequent costs which relate to the normal storage, care, and protection of the property for which the State is herein responsible shall be paid by the State.

ARTICLE VI. Responsibilities

1. The Federal Government will be responsible for:
 - a. Federal inspection, inventory, and maintenance of the hospital, at its prepositioned site. Inner pack inspections will be performed only by the Federal Government.
 - b. Replacing components having passed expiration dates or determined not to be usable through normal deterioration and replacing packaging materials that are damaged or deteriorated in normal storage.
 - c. Maintenance, reconditioning, and repacking of equipment in the hospital such as generators, pumps, and X-ray equipment.
 - d. Replacing damaged or destroyed components, including an entire hospital, if such damage has resulted from acts of God (storms, floods), or if it is determined that the damage was not caused by negligence of the State.
 - e. Replacing missing or damaged components regardless of cause when the total transaction cost does not exceed \$100.00 a hospital and there is no frequent repetition of such requirement.
2. States will be responsible for:
 - a. Storing the hospital in acceptable and normal storage conditions (refrigeration, heated, etc.) and the costs therefor.
 - b. Costs for replacing missing or damaged components which exceed \$100.00 a hospital, upon a determination that such loss was a result of negligence of a State or its agent. Replacements will be made from stocks of the CDM depots, costs to be reimbursed by the State.
 - c. Costs for relocation of the hospital from one location to another within the State provided that the new location is acceptable to the Federal Government.
 - d. Taking immediate action to minimize further loss in the event the hospital suffers damage or loss from whatever cause. Within 30 days of such loss, the State shall submit to the PHS Regional Health Director de-

tailed inspection report and inventory fully describing circumstances under which loss was incurred. The report shall show items missing or damaged, the extent of the damage, the estimated cost for rehabilitation, and action taken by the State to avoid further damage or loss of this Government property.

e. Maintenance of adequate surveillance of the hospital, including inventory and visual exterior package inspections as required for the assurance of the fulfillment of the State's responsibilities.

f. Furnish the Federal Government with a report at least once annually, of the conditions of the storage site and facility and the exterior package conditions of the components of the hospital.

ARTICLE VII. Use in a Civil Defense Emergency

It shall be the responsibility of the State to develop program plans for the utilization of civil defense emergency hospitals during a civil defense emergency as defined in the Federal Civil Defense Act of 1950 (Public Law 920, 81st Congress). Such plans shall have the formal approval of the Federal Government and shall provide for use by the State and/or its political subdivisions, or the civil defense organizations of either, of prepositioned civil defense emergency hospitals in the event of an attack.

ARTICLE VIII. Use in a Major Peacetime Disaster

A hospital or component parts thereof stored under this Agreement may be made available to the State or its political subdivisions for use in a major peacetime disaster as defined in the Federal Disaster Act of 1950 (Public Law 875, 81st Congress) upon the specific authorization of the PHS Regional Health Director, under such terms and conditions as he may prescribe, or in accordance with terms of approved written standby plans.

ARTICLE IX. Title to Property

A hospital stored under the terms of this Agreement shall remain the property of the Federal Government, and shall at all times be subject to Federal Government inspection and, as applicable, to the program control of the PHS Regional Health Director or the property accounting control of the Property Accountable Officer, PHS.

ARTICLE X. Appendixes

The Appendixes A, B, and C, annexed hereto are a part of this Agreement. Any revisions or alterations in the said appendixes also shall become a part of this Agreement.

ARTICLE XI. Amendments

Changes or modifications in these Terms and Conditions will be made only by executing a new Agreement. Revisions or adjustments may be made in the appendixes which do not affect the provisions of the basic Agreement. Changes in custodians' address and telephone number may be effected by correspondence.

ARTICLE XII. Term of Agreement

This Agreement shall be for a period of 1 year beginning with the date of property loan approval, and shall be automatically renewed from year to year thereafter unless terminated in the manner herein provided.

ARTICLE XIII. Termination

This Agreement may be terminated by either party at any time by 90 days notice in writing to the other party.

RESPONSIBILITIES OF CDEH PROPERTY CUSTODIAN

Article II of Part II, Terms and Conditions of the Storage Agreement, provides that the State will designate a property custodian. The normal responsibilities of the custodian are listed as follows:

a. In cooperation with State or local officials in his community, and upon receipt of notice from the Federal Government he will arrange to receive the hospital or additional supplies which are assigned to his custody.

b. Sign Shipping Authority Receiving Report, Form PHS-3704 upon delivery of materials, thereby accepting custodial property responsibility for such materials. Make accurate notation of shortage or damage, if any, on the reverse of Form PHS-3704, and distribute completed copies thereof as instructed.

c. Arrange the physical storage of materials so that the items having a limited shelf life will be readily accessible for inspection or rotation.

d. Make certain that cases requiring special storage, such as heated, refrigerated, or flammable, are properly stored. Check heated storage and refrigerated storage areas to assure proper temperatures at all times, especially during extreme temperature changes outdoors.

Heated storage, not below 32° F.

Refrigerated storage, 35° to 50° F.

e. Inspect the generators at least once every 3 months as required in Appendix C of the Storage Agreement. Determine whether or not the generators are in SAFE or UNSAFE storage condition. If a generator shows to be in an unsafe storage condition because of increase in the percentage of humidity above the allowable maximum, or for any other reason, this fact should be immediately reported to the State Health Director and the Servicing CD medical depot. The rehabilitation and repackaging of a generator found to be in an unsafe storage condition will be accomplished by the Federal Government.

f. Maintain the storage area under maximum safety and security, and under lock and key when unattended. Keys to such areas shall be in the possession of both the custodian and his designated alternate.

g. Cooperate in the arrangements for Federal Government inspectors and arrange to admit authorized inspectors or servicing teams to the storage site during inspections. Be present at the site during inspections.

h. Make frequent check of storage area to detect irregularities such as fire hazards, broken or unlocked windows, leaks in roof, leaking water pipes, etc. Repair or arrange to have such conditions repaired promptly.

i. Take immediate action to minimize the loss in the event the hospital is exposed to damage or loss from whatever source and report any damage or loss to the State Health Director promptly.

j. Annually inspect and arrange for the servicing of fire extinguishers or any other fire protective devices in the storage area.

k. Acquaint himself with approved procedures and authority for release of the hospital or parts thereof in case of a civil defense emergency.

l. Report to the State Health Director and the State Property Officer any change in custodian information; i.e., name, address, telephone numbers, and who has possession of the keys.

APPENDIX B of CDEH
Storage Agreement
Form PHS-3998
3-15-62

ALLOWANCES, BILLING, AND RECOVERY OF UNLOADING COSTS

Civil Defense Emergency Hospital Shipments

Article V of the Terms and Conditions of the Storage Agreement (Part II) provides that costs for placement into storage of the prepositioned CDEH will be borne by the Federal Government. An amount up to \$150.00 which is incurred by the State or its subdivision for labor in unloading and storing a whole unit hospital at an approved storage site or an amount up to \$50.00 for unloading and storing either Supply Addition No. 1 or Supply Addition No. 2 will be borne by the Public Health Service.

Requests for reimbursement must be submitted, in triplicate, to a DHEW Regional Office within 30 days after date of delivery on regular invoice or U.S. Standard Form No. 1034 and shall contain the following information:

a. Labor performed by employees of State or other political subdivision shall be itemized to include: (1) date; (2) employee name; (3) title; (4) number of hours; (5) hourly rate; and (6) total.

b. Labor or other service performed by outside contractor shall be substantiated by certified paid copies of invoices.

c. A signed certification to the effect that the labor or other service was performed to unload emergency hospital equipment and has been paid and that the rate is not in excess of that paid in the area for similar work. U.S. Standard Forms 1034 and 1035, Public Voucher for Purchases Other Than Personal, are available in the PHS Regional Office if desired.

Requests for reimbursement must be submitted by the State and shall represent final costs, as subsequent reimbursements will not be made. If the request is prepared by a political subdivision, it must be processed through and approved by the State Health Office or the State Civil Defense Office and forwarded to the applicable PHS Regional Office for approval and transmittal to the Division of Health Mobilization, Public Health Service, Washington 25, D.C., for acceptance and payment.

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
DIVISION OF HEALTH MOBILIZATION
STOCKPILE MANAGEMENT BRANCH
Washington, D.C. 20201

CD MEDICAL STOCKPILE
ADVISORY BULLETIN NO. 3 (Revised)

September 24, 1963

To: Managers, CDM Depots and Others concerned.
Subject: Criteria for Storage of Prepositioned Civil Defense Emergency Hospitals.

Purpose: To provide criteria for selection and evaluation of storage sites and storage maintenance applicable to CDEH's currently prepositioned, to the storage of these hospitals with expanded supply assemblies and to storage of new hospitals procured in 1962.

Storage Site Selection: With respect to assumed high risk or "target" areas, specific distance restrictions are excluded from the location criteria for prepositioned hospital units; however, every effort should be made to obtain locations as secure as possible, in or close to the building in which the hospital is to be set up.

A storage site within a high risk or "target" area or critical target area may be approved on a calculated risk basis when the use of a hospital so located is specifically covered in the local operational plan. The requirement for such a location must be confirmed in each storage agreement.

When a storage site is in a city or location other than that in which the proposed operating facility is located, transportation arrangements for the movement of the unit must be included as part of the hospital operational plan.

A minimum of 15,000 square feet of acceptable space is required to set up the hospital at the operating location.

Storage Facility: All CDEH storage areas shall afford complete protection from water and weather damage from whatever source; shall meet standard requirements for fire protection and shall not be subject to known fire hazards. Fire protective apparatus will be within or immediately adjacent to the storage area. Ground level storage is preferred unless acceptable, dry, physically secured, and humidity controlled basement or other underground storage is available. Storage areas at or below surface level normally will be equipped with floor drains or other means to remove water which may accidentally enter. Unsurfaced earth floors are not satisfactory for CDEH storage. The storage area shall be adequately protected against rodents, insects and other vermin. Consideration should be given to the adequacy of stairways, doors, ceiling heights and the weight limit of floors. The storage area shall afford maximum safety and security and shall be under lock and key when unattended. Storage shall be in rooms or enclosed areas which are designed only for the CDEH. Keys to such areas shall be in the sole possession of the custodian, except that an additional key may be held by his designated alternate.

Storage Requirements: The CDEH should be stored intact at a single approved site. This specification may be waived under justifiable circumstances in the instances of specialized storage; i.e., refrigerated, heat-protected or flammable storage. If it is not possible to provide heat-protected or refrigerated storage, as required at the prepositioned storage site, the hospital components requiring such storage should be stored in other facilities, under desirable conditions, providing such facilities are in reasonably close proximity and that similar arrangements exist for accountability, safeguarding and emergency distribution of the supplies to the CDEH. The street address of all storage locations must be recorded.

All components shall be stored so that they may be readily accessible for inventory and inspection at any time by Government representatives. In addition, the storage site shall provide easy accessibility and permit rapid outloading. Aisles, clearance of walls and clearance of ceilings must comply with standard storage practices and with local fire regulations.

Cases containing dated items shall be stored so they are easily accessible and can be readily opened to permit rotation of contents without having to displace other stacked cases.

All items requiring refrigeration shall be stored continuously under refrigeration, temperature of 35° F. Radiographic paper and developer may be removed from its outer case packaging for the purpose of fitting the inner packages into a household type refrigerator. During defrosting of the refrigerator, the paper should be removed during the short interval of defrosting and replaced promptly thereafter. The outer container shall be retained for possible future repackaging.

Since a large percentage of the hospital material has to be handled manually, most of the individual case weights do not exceed 85 pounds. A stacking height of 6 feet above dunnage is considered optimum for storage by hand labor.

All storage areas at or below ground level and those with concrete flooring shall be provided with a minimum 4-inch dunnage or pallets for storage of all CDEH components.

Posting of CDEH Storage Locations: Wherever components of a CDEH are stored at separate locations, a placard, Form PHS-4312-1 will be posted at the main CDEH storage site, to alert and notify all those concerned with the operation, maintenance and inspection of the hospital unit as to the location(s) of the balance of the medical supplies and equipment. Similarly, a placard, Form PHS-4312-2 will also be posted at each subordinate storage location of material which is separated from the major portion of the CDEH.

Forms PHS-4312-1 and PHS-4312-2 will be distributed to the depots having CDEH inspection responsibilities, for posting at prepositioned CDEH sites at the time of inspection. Subsequent shipments of CDEH's will include one main storage placard and one subordinate storage placard for each such place as indicated by the Division of Health Mobilization in its request for the shipment of a hospital. Appropriate instructions will be given to the custodians in the latter cases for posting the placards.

Limited quantities of the placards for use by the States or local communities will be supplied by CD Medical Depots upon requests submitted to the depots by DHM regional representatives.

Space Requirements: Storage space requirements are shown in attached table (Exhibit No. 1) for all assemblies and subassemblies that are existing or planned for the CDEH prepositioning program. Gross cube and square footage requirements are calculated to provide optimum storage under orderly and systematic arrangements that permit: (a) Ready access for outloading to operational area or site, (b) accessibility of items for rotation, exchange and for maintenance, i.e., generators, pumps, gas cylinders, (c) accessibility of all components for inventory and inspection with minimum of case handling.

The attached Exhibit No. 2, CDEH Suggested Storage Plan, illustrates a storage area, packing case arrangement and other features of an ideal CDEH storage site.

In summary, all existing CDEH's when augmented with a complete 30-day supply capability and new hospitals procured in 1962 will require storage space, totaling approximately 7,283 cubic feet and 1,120 square feet if stacked to an optimum height of 6 feet, with a minimum of 6-inch clearance at the ceiling. Dunnage and additional ceiling clearances, when involved, will add to the gross cubic foot requirement.

The following listing of major hospital components provides information on maximum weights and dimensions that may be useful in arranging for special handling or equipment required for unloading the hospital.

Nomenclature	Dimensions (Inches)	Weight (pounds)	Cubic feet
Generator—10-kw. (two in a 1962 hospital).....	(est.) 66 x 35 x 48	(each) 1,000	66.0
Generator—15-kw.....	84 x 60 x 41	1,960	119.6
Water pumping unit, 10 g.p.m.....	38 x 38 x 25	225	20.9
Tank, water, storage, nylon, 1,500 gallon.....	76 x 28 x 27	435	33.3
Radiographic and fluoroscopic unit, field. Packed in two cases:			
(1) Control unit and transformer X-ray apparatus.....	36 x 22 x 19	232	9.3
(2) Table and tube stand.....	87 x 36 x 14	525	22.7

Generator Inspection: Inspection of the 15-kw., 10-kw., and 2½-kw. generators should be performed at least once every 3 months.

The custodian should open inspection doors and observe the color on the humidity indicator card which is placed inside the vapor barrier behind a plastic window.

There are two types of indicator cards in use on these generators:

a. The three-spot humidity indicator card. If all spots are blue, the generator is in a safe storage condition with the humidity inside the vapor barrier at about 25 percent. If only the bottom spot is pink, the relative humidity is about 30 percent, and the generator is in a safe storage condition. If the bottom and middle spots are pink, it indicates an increasing humidity condition (about 40 percent) requiring closer surveillance and more frequent inspection. When all three spots are pink, the generator is considered to be in an unsafe storage condition, and this fact should be immediately reported to the appropriate servicing depot.

b. The bar humidity indicator card is made up of a column of silica gel placed in a horizontal position (measures about 8 inches long) and overprinted with a color chart to indicate relative humidity within the package. When the card indicates the humidity within the package is 40-60 percent range, the generator is considered to be in an unsafe storage condition, and this fact should be promptly reported.

EXHIBIT No. 1. *Storage Space Requirements for the CDEH Prepositioning Program*

	General storage	Heat protected storage	Refrig- erated storage	Flam- mable storage	Appropri- mate number shipping cases	Net cubic feet	Gross cubic feet	Gross square feet
	<i>Cubic feet</i>	<i>Cubic feet</i>	<i>Cubic feet</i>	<i>Cubic feet</i>		<i>Shipping</i>	<i>Storage</i>	
(a) 1962 Model CDEH (estimated), subject to adjustment on completion of first assembly-----	5, 648	1, 165	² 33	437	720	3, 335	¹ 7, 283	1, 120
(b) 1957 and earlier Model CDEH-----	3, 451	146	9	34	364	1, 571	3, 640	560
(c) Expansion unit to increase supply operating capability of (b) to 30 days (estimated), subject to adjustments upon completion of first assembly----	2, 298	1, 010	24	411	236	1, 665	3, 743	575
Total (b) and (c) only-----	5, 749	1, 156	33	445	600	3, 236	7, 383	1, 135
(d) First increment of (c) from existing depot stocks "Supply addition No. 1"-----	359	135	³ 15	0	78	245	509	78

¹ The gross cubic feet is on a basis of a square area 28 feet x 40 feet, shown in Exhibit 2, multiplied by 6-foot stacking height plus 6-inch ceiling clearance. Where dunnage is required add an additional 6 inches to the multiplier. When fire regulations require more than 6-inch ceiling clearance, add the amount over 6 inches to the multiplier.

General storage----- Items do not require special storage, but must be in a dry secure space.

Heat protected storage----- Protect items from freezing--store at not below 32° F.

Refrigerated storage----- Refrigeration temperatures required at 35°-50° F. Because of the substantial investment in items requiring refrigeration the refrigeration equipment should be inspected at intervals of once a week. It is suggested that an electric signal light be installed, outside of the storage area, which would indicate mechanical or electrical failure in the refrigeration equipment.

Flammable storage----- Combustible items to be stored in separate area to minimize possible fire hazard.

REFRIGERATED ITEMS

² Items listed in the 1962 Model CDEH will require approximately 33 cubic feet of refrigerated storage space. The cube of refrigerated items for the 1962 Model CDEH are estimated at this time on near dimensions of packages. Exact dimensions of packages will be known only upon completion of procurement and packaging operations.

³ The actual cube of the shipping containers (not to be confused with required storage space) is 9.0 cubic feet for items in Supply Addition No. 1. To compensate for air space and variance of like items from different suppliers, 15 cubic feet of storage space is required for the below listed items in Supply Addition No. 1:

The 4 cases requiring refrigeration have dimensions as follows:

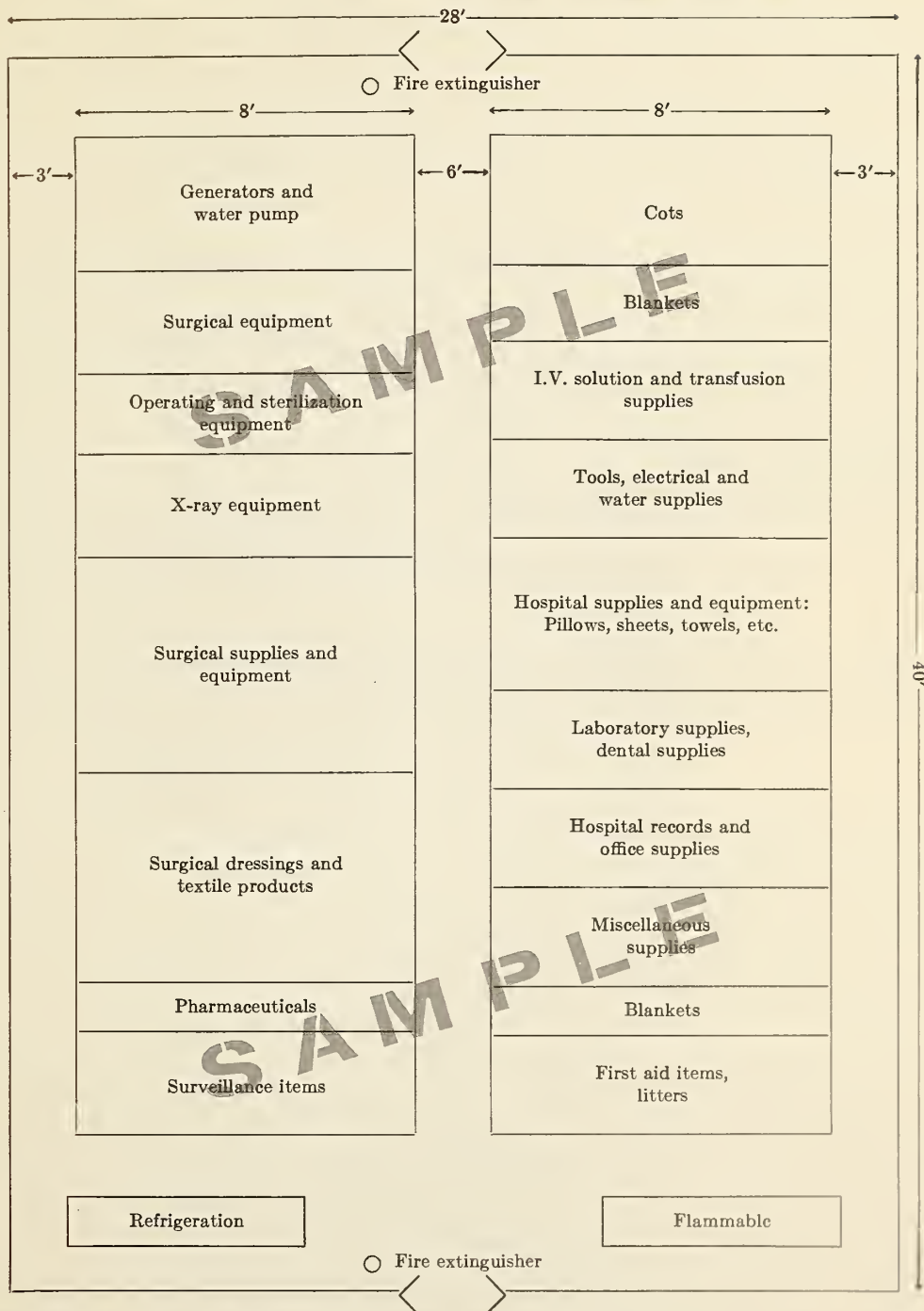
3 cases albumin--22" long by 16" wide by 14" deep.

1 mixed case--13" long by 11" wide by 7" deep.

PLEASE NOTE.--Sufficient refrigerated space must be provided to permit approximately 2" of air space on all six (6) surfaces of each container. Further, a minimum of 2" of dunnage shall be provided on the floor of the refrigerator. Direct or net cubic storage capacity of household type of refrigerators will vary according to the total inside capacity of cooling units, dry compartment and door recess area. These factors must be taken into consideration in providing adequate refrigerator space. For example, one type of household refrigerator which will provide storage for packages of the dimensions shown for those in Supply Addition No. 1 may have an overall rating of 15 or 18 cubic feet.

CD MEDICAL STOCKPILE
ADVISORY BULLETIN NO. 3 (Rev.)

EXHIBIT No. 2. 1962 CDEH Space Requirements and Suggested Storage Plan



Stacking height approximately 6 feet, plus dunnage. Minimum 6-inch ceiling clearance required except when fire regulations require greater clearance.

APPENDIX C

Other Publications on the Civil Defense Emergency Hospital

Establishing the Civil Defense Emergency Hospital (F-1)

X-Ray Section of the Civil Defense Emergency Hospital (F-2)

Central Supply Section of the Civil Defense Emergency Hospital (F-3)

Laboratory Section of the Civil Defense Emergency Hospital (F-4)

Operation of Generators and Water Pumps in the Civil Defense Emergency Hospital (F-5)

Storage Structures Erected for Prepositioned Civil Defense Emergency Hospitals (F-7)

Storage Code, Model-62, Civil Defense Emergency Hospital (F-8)

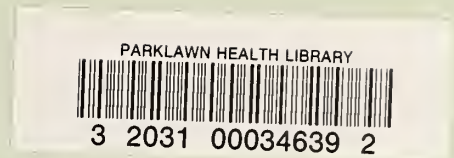
Storage Locations (F-9)

Model 62 Civil Defense Emergency Hospital - Component Listing and Storage Data (F-11)

Checklist for Developing a Civil Defense Emergency Hospital Utilization Plan

The above publications are, or will be, available upon request from your State Health Department, civil defense office, or Division of Health Mobilization, Public Health Service, Washington, D.C., 20201.

U.S. GOVERNMENT PRINTING OFFICE : 1964 O-732-485



Publications in the Health Mobilization Series are keyed by the following subject categories:

A--Emergency Health Services Planning

B--Environmental Health

C--Medical Care and Treatment

D--Training

E--Health Resources and Evaluation

F--Civil Defense Emergency Hospitals

G--Health Facilities

H--Supplies and Equipment

I--Health Manpower

J--Public Water Supply



